



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200

644.4114

Job Sheet 175557



Part No: 644.4114

Job Qty: 10 ea

Part Name: Washer, Pivot



Part Weight: 0 lbs

Status: Scheduled

Priority: Medium

Job Created: 4/6/18

Job Tracking No:

Due Date: 4/16/18

Created By: Marie Lajeunesse

Type: SOLD

Description:

Note: DWG 644.4100 Rev F2 IPP REV:A NEW ISSUE 16-12-06 JLM VERIFIED BY:DD

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation          | Qty    | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off        |
|-------|--------------------|--------|------------|----------|-----------|---------|-----------------------|-----------|-----------------|
|       |                    |        |            |          | Setup hrs | Run Hrs | Workcenter / Supplier | Lead Time |                 |
| 100   | Start up Operation | 10 Ea  |            | 4/13/18  | 0.00      | 0.00    | Start Up Machining-4  |           | <i>18/05/03</i> |
| 110   | Doosan             | 10 pcs |            | 4/14/18  | 0.00      | 10.00   | Doosan                |           | <i>18/05/03</i> |
| 120   | QC                 | 10 pcs |            | 4/14/18  | 0.00      | 0.00    | QC2 Machining-1       |           | <i>18/05/03</i> |
| 130   | QC                 | 10 pcs |            | 4/14/18  | 0.00      | 0.00    | QC8 Machining-2       |           | <i>18/05/03</i> |
| 140   | Outsource          | 10 pcs |            | 4/14/18  | 0.00      | 0.00    | Outsource4            |           | <i>18/05/03</i> |
| 150   | Packaging          | 10 pcs |            | 4/14/18  | 0.00      | 0.00    | Packaging2            |           | <i>18/05/03</i> |
| 160   | QC                 | 10 pcs |            | 4/14/18  | 0.00      | 0.00    | QC6                   |           | <i>18/05/03</i> |
| 170   | SprayPaint         | 10 pcs |            | 4/16/18  | 0.00      | 1.00    | Spray Paint           |           | <i>18/05/03</i> |
| 180   | QC                 | 10 pcs |            | 4/16/18  | 0.00      | 0.00    | QC14                  |           | <i>18/05/03</i> |
| 190   | Packaging          | 10 pcs |            | 4/16/18  | 0.00      | 0.00    | Packaging3-1          |           | <i>18/05/03</i> |
| 200   | QC21-SA            | 10 Ea  |            | 4/16/18  | 0.00      | 0.00    | QC21                  |           | <i>18/05/03</i> |

Part Op 110 - 1-Machine as per folio FOLIO REV: DWG REV: 2-Debur  
Descriptions: 140 - 1-ISSUE P/O TO ATG: 2-Anodize Black -MPP-172 Section 2.1 -Hard Anodize IAW Mil-A-8625  
Type 3 Class 2 3-Certification of Conformity is required  
170 - PRIME AS PER DWG AND NOTE 4 BATCH: PAINT AS PER DWG AND NOTE 4  
BATCH:  
190 - \*\*\*IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV\*\*\*

### Job BOM

| Part / Item   | Component Name        | Quantity           | Operation              | Container |
|---------------|-----------------------|--------------------|------------------------|-----------|
| M6061T6R2.000 | 6061T6 Round Bar 2.00 | .5800 ft (.058 ea) | 100-Start up Operation |           |

### Job Allocations

| Operation              | Component Part | Required | Inventory | Allocated |
|------------------------|----------------|----------|-----------|-----------|
| 100-Start up Operation | M6061T6R2.000  | 1        | 22        | 0         |

### Part Specifications

Specifications could not be found.

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                 |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Step #:                                                                                                                                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | MRB (QSI042) Approval                           |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                 |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | QC / QA Coordinator<br>Approval                 |  |
| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div>           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div>           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div>           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Misabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div>           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |  |                                                 |  |
| OTHER : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                 |  |





DQA: \_\_\_\_\_ Date: \_\_\_\_\_



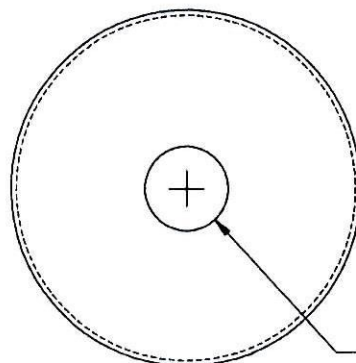
## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

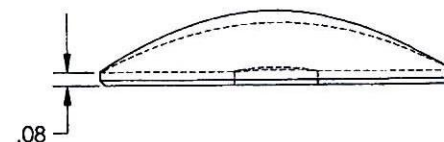
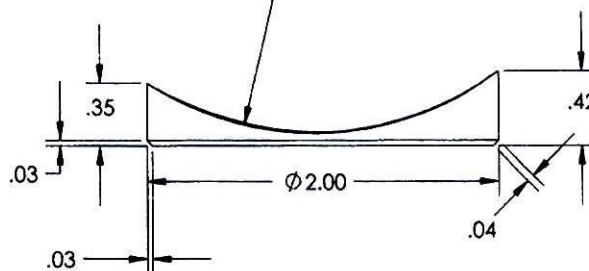
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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Step #:                                                                                                                                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | MRB (QSI042) Approval |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                       |  |
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| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div>           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div>           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div>           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Misabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div>           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |                       |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |  |

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APICAL INDUSTRIES ANY REPRODUCTION IN PART OR WHOLE WITHOUT  
THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.



Ø .475 THRU

R1.75



644.4114  
WASHER, PIVOT

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|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------|----------------------|
| ORIGINAL DATE<br>1-10-84-105                                                                                                                   | 08-01-05              | APICAL INDUSTRIES                                                  |                      |
| DRAWN BY<br>D. PARROTT                                                                                                                         | ENGINEER<br>J. JOSEPH | 2608 TEMPLE HEIGHTS DR.<br>OCEANSIDE, CA. 92036-3512 (760)724-5300 |                      |
| DRAWING APPROVAL<br>J. JOSEPH 08-29-05                                                                                                         | CONTRACT NO.          | PIVOT STEP ASSY                                                    |                      |
| UNLESS OTHERWISE SPECIFIED<br>DIMENSIONS ARE IN INCHES<br>TOLERANCES ARE:<br>2 PLACE DECIMALS ± .03<br>3 PLACE DECIMALS ± .010<br>ANGLES ± .5° |                       | REV. CADET CODE<br>B 07/02/06                                      | DWG. NO.<br>644.4100 |
| SCALE NONE                                                                                                                                     |                       | SHEET 6 OF 16                                                      |                      |



DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

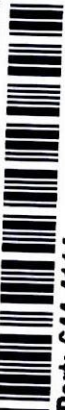
|                                                              |                      |                          |                                   |                          |            |                          |                     |                          |             |                          |
|--------------------------------------------------------------|----------------------|--------------------------|-----------------------------------|--------------------------|------------|--------------------------|---------------------|--------------------------|-------------|--------------------------|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b>   |                          | <b>AGAINST DEPARTMENT/PROCESS</b> |                          |            |                          |                     |                          |             |                          |
|                                                              | Rework               | <input type="checkbox"/> | Skid-tube                         | <input type="checkbox"/> | Cross tube | <input type="checkbox"/> | Water Jet           | <input type="checkbox"/> | Engineering | <input type="checkbox"/> |
|                                                              | Scrap                | <input type="checkbox"/> | Machining                         | <input type="checkbox"/> | Small Fab  | <input type="checkbox"/> | Prod. Eng. Coord.   | <input type="checkbox"/> | Quality     | <input type="checkbox"/> |
|                                                              | Use-as-is            | <input type="checkbox"/> | Thermoforming                     | <input type="checkbox"/> | Finishing  | <input type="checkbox"/> | Rec/Store/Packaging | <input type="checkbox"/> | Other       | <input type="checkbox"/> |
|                                                              | Suspected Unapproved | <input type="checkbox"/> | Large Fab                         | <input type="checkbox"/> | Composite  | <input type="checkbox"/> | Supplier            | <input type="checkbox"/> |             |                          |

|                                  |         |                 |                                              |
|----------------------------------|---------|-----------------|----------------------------------------------|
| Date :                           | Step #: | QTY Effective : | MRB (QSI042) Approval                        |
| Description Work Order Deviation |         | Disposition     | Completed By                                 |
|                                  |         |                 | Lead hand / Supervisor Approval Verification |
|                                  |         |                 | QC / QA Coordinator Approval                 |
|                                  |         |                 |                                              |

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hamilton, ON K6A 1K7  
CANADA  
TEL: 1 613 832-5200  
Email: sales@dartaero.com  
www.dartaerospace.com



Container No: S068250



Part: 644.4114

Job No: 175557

Serial No/Batch: S068250

Revision: F2  
Inspector:

Date: 05/03/18

### FAULT CATEGORY

|                 |                          |                       |                          |                      |
|-----------------|--------------------------|-----------------------|--------------------------|----------------------|
| Effect          | <input type="checkbox"/> | Power Loss/Surge      | <input type="checkbox"/> | Positioned Wrong     |
|                 | <input type="checkbox"/> | Folio/Program         | <input type="checkbox"/> | Outside Dimensions   |
|                 | <input type="checkbox"/> | Grain                 | <input type="checkbox"/> | Over/Under tolerance |
|                 | <input type="checkbox"/> | Weld                  | <input type="checkbox"/> | Part Incorrect       |
| ete/Unqualified | <input type="checkbox"/> | Wrong Stock Pulled    | <input type="checkbox"/> | Part Lost/Missing    |
|                 | <input type="checkbox"/> | Out of Sequence       | <input type="checkbox"/> | Part Moved           |
|                 | <input type="checkbox"/> | Off-set               | <input type="checkbox"/> | Drawing              |
|                 | <input type="checkbox"/> | Mislabeled            | <input type="checkbox"/> | Finish               |
| plete/Unclear   | <input type="checkbox"/> | Fit/Function          | <input type="checkbox"/> | Misread              |
|                 | <input type="checkbox"/> | Misaligned/off center | <input type="checkbox"/> | Turning Sequence     |
|                 |                          |                       |                          |                      |



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200

# PURCHASE ORDER

## PO039824

**Supplier:** ATG001-VC  
A.T.G. Industries Inc  
731 INDUSTRIELLE ROAD  
ROCKLAND  
ON  
K4K 1T2 Canada  
Phone: 613-446-4544  
Fax: 613-446-4556

**PO No:** PO039824  
**PO Date:** 5/8/18  
**Due Date:** 5/17/18  
**Purchase Order**  
**Revision:**  
**Revision Date:**  
**Ship-To Contact:** Tsimiklis, Chrisoula  
**Phone:**

**Attention:** Lalande, Marc-Andre

**Via:** Ground  
**Pynt Terms:** Net 30

**Ship To:** 1270 Aberdeen Street  
Hawkesbury  
ON  
K6A 1K7 Canada  
Phone: 613-632-5200

**Freight Terms:**  
**Special Comments:**

### Items

| Line Item | Job    | Part     | Description                                                                                                                                                                                           | Status | Due Date | Order Quantity | Received Quantity | Balance | Unit Price (CAD)                    | Extended Price |
|-----------|--------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------|----------------|-------------------|---------|-------------------------------------|----------------|
| 1         | 175552 | 644.4113 | Spacer, Stop<br>1-ISSUE P/O TO<br>ATG: _____<br><br>2-Anodize Black<br>-MPP-172 Section 2.1<br>-Hard Anodize IAW Mil-A-8625 Type 3<br>Class 2<br><br>3-Certification of Comformity is<br>required     | Firmed | 5/16/18  | 20 pcs         | 0 pcs<br>20x      | 20 pcs  | \$4.20/pcs<br>A119/05/17            | \$84.00        |
| 2         | 175557 | 644.4114 | Washer, Pivot<br>1-ISSUE P/O TO<br>ATG: _____<br><br>2-Anodize Black<br>-MPP-172 Section 2.1<br>-Hard Anodize IAW Mil-A-8625 Type 3<br>Class 2<br><br>3-Certification of Comformity is<br>required    | Firmed | 5/16/18  | 10 pcs         | 0 pcs<br>10x      | 10 pcs  | \$5.70/pcs<br>A119/05/17            | \$57.00        |
| 3         | 175558 | 644.4119 | Spacer, Fwd Stop<br>1-ISSUE P/O TO<br>ATG: _____<br><br>2-Anodize Black<br>-MPP-172 Section 2.1<br>-Hard Anodize IAW Mil-A-8625 Type 3<br>Class 2<br><br>3-Certification of Comformity is<br>required | Firmed | 5/16/18  | 20 pcs         | 0 pcs<br>20x      | 20 pcs  | \$4.50/pcs<br>A119/05/17<br><br>CDL | \$90.00        |

145  
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989





A.T.G. Industries Inc.  
731 Industrielle Street  
Rockland, ON K4K 1T2  
Canada

Ph: (613) 446-4544

Fax: (613) 446-4556

### Pack List

Number: 915145

Date: 11-May-18

#### To

Dart Aerospace Ltd  
1270 Aberdeen St  
Hawkesbury, ON K6A 1K7

#### Ship To

Chrisoula Tsimiklis  
Dart Aerospace Ltd  
1270 Aberdeen St  
Hawkesbury, ON K6A 1K7

Ph: 613 632-9577

Fax: 613 632-1053

Ph: 613 632-9577

Fax: 613 632-1053

| Terms                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                              | Ship Via  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                              | OUR TRUCK |  |
| Quantity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Description                                                                                                                                                  |           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Please reference this document's Pack List number on all correspondences regarding this shipment. If you have any questions, please contact us.              |           |  |
| 20<br>ea                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Part: 644.4113<br>Spacer, Stop<br>Hard Black Anodize per MIL-A-8625F, Type III, Class 2, .0005-.0045" (.5 - 4.5mils).<br>Job: 23037 PO: PO039824 Line: 1     | Rev: F    |  |
| 10<br>ea                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Part: 644.4114<br>Washer, Pivot<br>Hard Black Anodize per MIL-A-8625F, Type III, Class 2, .0005-.0045" (.5 - 4.5mils).<br>Job: 23038 PO: PO039824 Line: 2    | Rev: F    |  |
| 20<br>ea                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Part: 644.4119<br>Spacer, Fwd Stop<br>Hard Black Anodize per MIL-A-8625F, Type III, Class 2, .0005-.0045" (.5 - 4.5mils).<br>Job: 23039 PO: PO039824 Line: 3 | Rev: F    |  |
| 10<br>ea                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Part: 644.4124<br>Washer, Pivot<br>Hard Black Anodize per MIL-A-8625F, Type III, Class 2, .0005-.0045" (.5 - 4.5mils).<br>Job: 23044 PO: PO039824 Line: 8    | Rev: F    |  |
| <b>CERTIFICATE OF CONFORMANCE</b><br>A.T.G Industries Inc. certifies that all items in this shipment conform to the requirements.<br>Date: <u>11/05/2018</u><br>Certified Signature: <u>[Signature]</u><br>Receiver Signature: _____<br>A.T.G Industries Inc. is AS9100 Registered and Nadcap Chemical Processing Accredited.<br>Note: This Packing Slip may contain parts that have been PLATED. Items that are plated may be subject to natural tarnishing and it is suggested that they be inspected within 24 hours of<br>Made in Canada. |                                                                                                                                                              |           |  |

DA6  
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9-89





A.T.G. Industries Inc.  
731 Industrielle Street  
Rockland, ON K4K 1T2  
Canada

Ph: (613) 446-4544

Fax: (613) 446-4556

### Pack List

Number: 915145

Date: 11-May-18

#### To

Dart Aerospace Ltd  
1270 Aberdeen St  
Hawkesbury, ON K6A 1K7

#### Ship To

Chrisoula Tsimiklis  
Dart Aerospace Ltd  
1270 Aberdeen St  
Hawkesbury, ON K6A 1K7

Ph: 613 632-9577

Fax: 613 632-1053

Ph: 613 632-9577

Fax: 613 632-1053

|                 |             |           |  |
|-----------------|-------------|-----------|--|
| Terms           |             | Ship Via  |  |
|                 |             | OUR TRUCK |  |
| Quantity        | Description |           |  |
|                 | receipt.    |           |  |
| Made in Canada. |             |           |  |